Postvention: A Chaplain's Response

DOD/VA Annual
Suicide Prevention Conference

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All The Way Home: Preventing Suicide Among Service members and Veterans

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Force Chaplain, COMSUBLANT

Focus

- **Highlight importance of postvention actions in response to completed suicide and attempts.**
- **Provide some tools and resources to bring back to your commands.**

Postvention (assumptions)

- **All involved with suicide will follow reporting procedures as outlined in appropriate service instructions.**
- **CACO/CNO functions pursued and accomplished.**

Postvention (assumptions)

- **Postvention is not just the immediate responses to event, but long term follow through actions to mitigate further issues and problems for survivors in the future.**

Assumptions

- **Historically we have focused on prevention and intervention in military.**

- **Postvention is directly related to prevention with:**

  -survivors of successful suicide

  -survivors of attempts

Postvention (defined)

- **Is all interventions that attempt to reduce the negative consequences that may affect those close to the victim after a suicide has occurred.**

- **Is psychological first aid for those bereaved by suicide. It's purpose ultimately is to restore hope in a person or community devastated by a suicidal event.**

Postvention (definition)

From Wikipedia, the free encyclopedia

- A **postvention** is an intervention conducted after a suicide, largely taking the form of support for the bereaved (family, friends, professionals and peers). Family and friends of the suicide victim may be at increased risk of suicide themselves.
- The aim is to support and debrief those affected; and reduce the possibility of suicide contagion. Interventions recognize that those bereaved by suicide may be vulnerable to suicidal behavior themselves and may develop complicated grief reactions.
- Postvention includes procedures to alleviate the distress of suicidally bereaved individuals, reduce the risk of imitative suicidal behavior, and promote the healthy recovery of the affected community. Postvention can also take many forms depending on the situation in which the suicide takes place. Schools and colleges may include postvention strategies in overall crisis plans. Individual and group counseling may be offered for survivors (people affected by the suicide of an individual).

Postvention (definition)

- **“Affected” Individuals may include family members, friends and coworkers.**
- **Affected individuals are often referred to as “survivors" of suicide.**

Postvention (purposes)

- **To deliver immediate and acute psychological/spiritual support.**
- **Lessen the distress.**
- **Restore coping ability.**
- **Bring hope to a hopeless situation.**
- **Rebuild normalcy around acute loss.**

Postvention (something to consider)

What about the “other” survivors?

Postvention (something to consider)

- **“Survivor of suicide”: an individual who survives an attempt.**
- **“Suicide survivors”: those left behind by the person who completes a suicide**

Postvention (why needed)

- **Loss from suicide is shocking and unexpected.**
- **Ensuing grief is more complex, intense and long term.**

Postvention (why needed)

- **There are layers of grief involved.**

  1. Suicide avoidable
  2. Suicide intentional
  3. Suicide unanticipated
  4. Stigma and shame come with it

Postvention (why needed)

- **Long term follow up needed to mitigate issues that may crop up in certain individuals after those not greatly affected by suicide return to normal.**

Postvention (goals)

- **Ease trauma and related effects to survivors.**
- **Reduce the onset and impact of psychological / spiritual distress and disorders.**

Postvention (goals)

- **Minimize risk of further suicidal behavior.**
- **Encourage resiliency and coping skills.**

Postvention (special issues)

- **Postvention given in a strained environment not only because of sudden and unexpected loss, but it is an event that people don’t want to talk about.**
- **Our baseline stress levels in the military already higher than civilian population.**

Postvention (special issues)

- **Extreme emotional reactions:**
  - **Grief**
  - **Guilt**
  - **Anger**

Rejection/Abandonment

- **Shame/Isolation**
- **Betrayal**

Postvention (special issues)

- **Social Stigma.**
- **Survivors may receive much less social support than with “normal” death.**

Postvention (special issues)

- **Tendency on part of commands to move along due to nature of our military “business”.**
- **Some unit members may need more dwell time to process event.**

Postvention (goals)

- **Take care of our people.**
- **Take care of family members.**
- **Return command to high state of mission readiness.**

Postvention (procedures)

- **Be prepared ahead of incident.**
- **Assess the suicide's impact on the command and estimate the level of postvention response.**
- **Assess if postvention necessary.**

Postvention (procedures)

- **CO contacts the family of the suicide victim after CACO notification.**
- **Determine time to meet with unit and what information to share about the suicide.**

Postvention (procedures)

- **Determine how to share information about the suicide with entire unit and media.**
- **Identify service members significantly affected by the suicide and initiate a referral mechanism as needed.**

Postvention (procedures)

- **Conduct daily review with key people.**
- **Plan and conduct appropriate Memorial service(s).**
- **Debrief the postvention response.**

Postvention (keep in mind)

Immediate needs of suicide grievers.

1. Know what they are feeling is normal reaction to abnormal situation.

2. Support: preferably from other survivors of completed suicides.

Postvention (keep in mind)

- **Postvention First Aid**

  -Establish rapport with survivors.

  -Affirm grief normalization.

  -Facilitate understanding of scene processing.

  -Mobilize support system.

  -Educate on community services.

  -Encourage follow through.

Postvention (keep in mind)

- **What complicates suicide loss**

  -not able to express grief.

  -witnessing or discovering the body.

  -being far away from the event.

Postvention (keep in mind)

- **What complicates suicide loss**

  -controversial/high media interest

  suicide.

  -legal involvement.

  -problematic relationship leading

Postvention (keep in mind)

- It is clear to me that everyone needs to be part of the outreach effort. Everyone should know what to watch for: anger, moodiness, insomnia, nightmares, gallows humor or none at all, jumpiness, suspicion, withdrawal, loss of appetite; how to ask if someone wants to talk, and what to do if they need to but don't want to. We want people to know they are needed, and that they can get help anonymously at www.militaryonesource.mil, or www.militarymentalhealth.org, www.health.mil.
- These are things all chaplains know and do, every day. We in medicine know that, as the old French saying puts it, our job is to ''cure sometimes, relieve often, comfort always.'' But we do not always succeed. We need your help.
- So thank you for counseling our wounded; thank you for bringing home our lost sheep; thank you for counseling our caregivers. One hand washes the other. The great military surgeon Ambrose Pare said, ''I dress the wound, God heals it''. We are now struggling to support those who are struggling. We need your prayers. Whether the wound is of the flesh, or of the mind we only dress it. God heals it.

S.W. Casells Assistant Secretary of Defense for Health Affairs

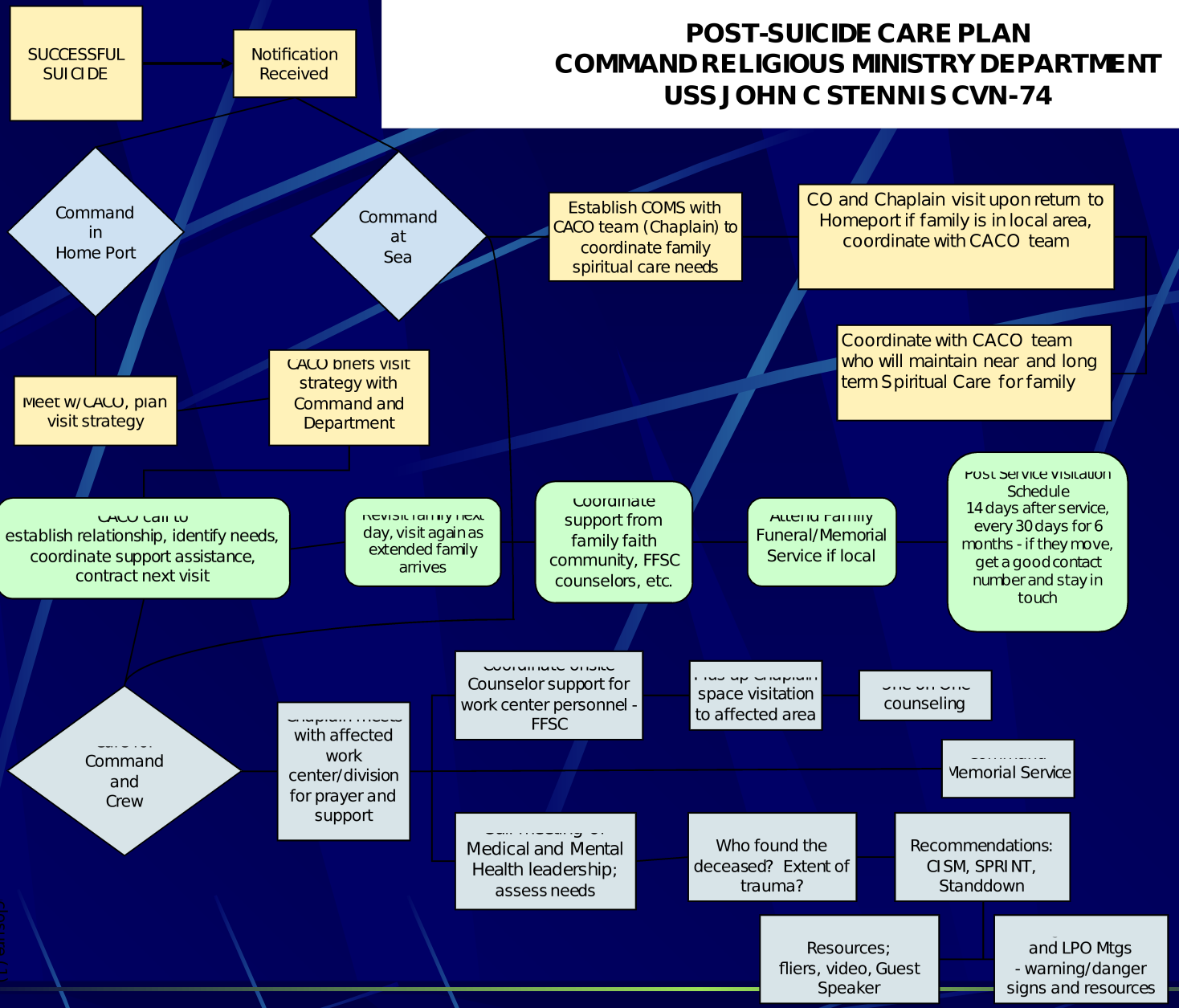
Postvention (resources)

- http://workingminds.org/aftermathresources.html
- http://www.sprc.org
- http://www.dcoe.health.mil/Links.aspx

Postvention (resources)

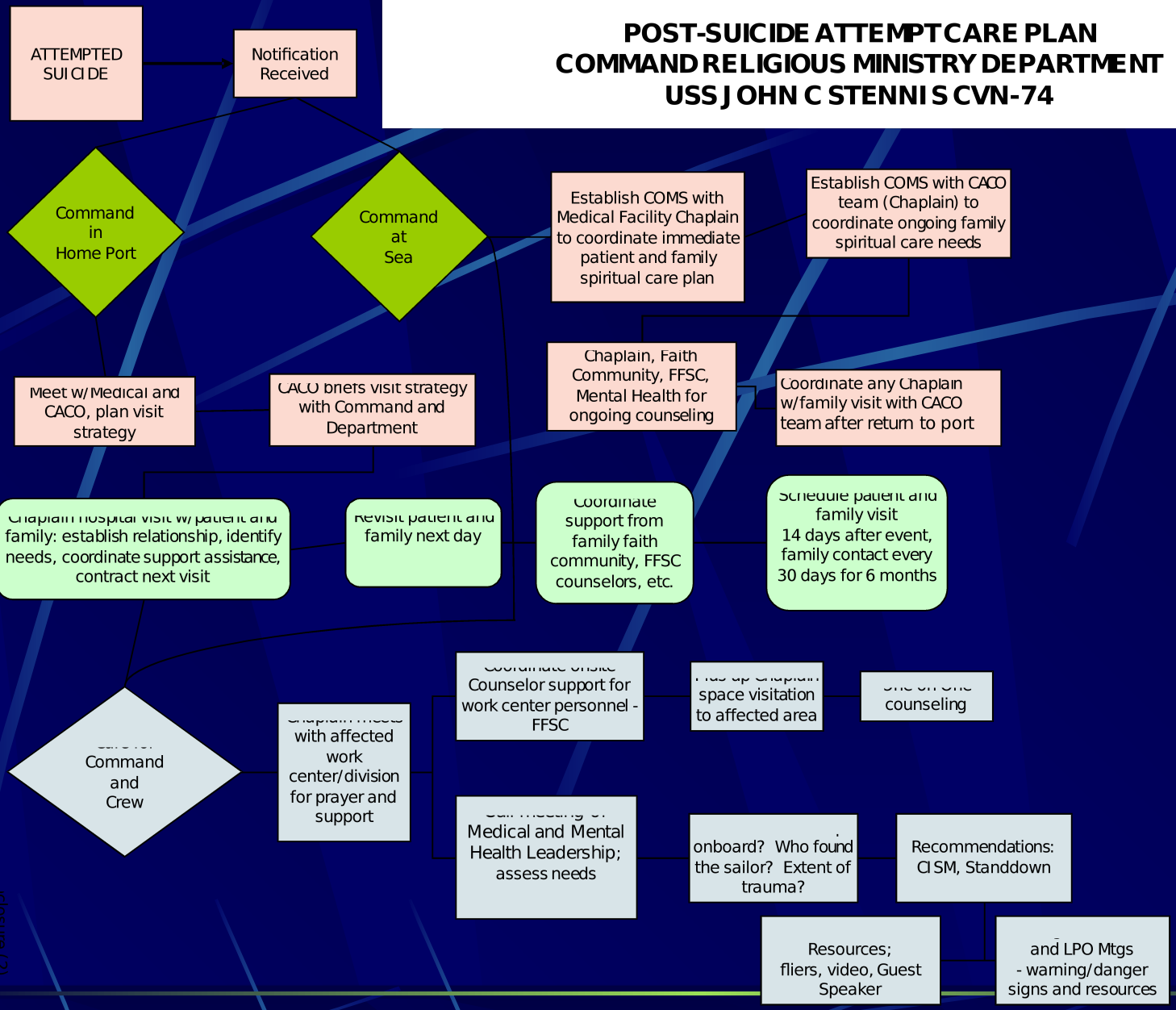
- http://lifegard.tripod.com/links.html#SURVIVORS
- http://www.samhsa.gov/prevention/suicide.aspx

POST-SUICIDE CARE PLAN
COMMAND RELIGIOUS MINISTRY DEPARTMENT
USS JOHN C STENNIS CVN-74


SUCCESSFUL SUICIDE
Notification Received
Command in Home Port
Command at Sea
Establish COMS with CACO team (Chaplain) to coordinate family spiritual care needs
CO and Chaplain visit upon return to Homeport if family is in local area, coordinate with CACO team
Coordinate with CACO team who will maintain near and long term Spiritual Care for family
Meet w/ CACO, plan visit strategy
CACO briefs visit strategy with Command and Department
establish relationship, identify needs, coordinate support assistance, contract next visit
Revisit family next day, visit again as extended family arrives
Coordinate support from family faith community, FFSC counselors, etc.
Attend Family Funeral/Memorial Service if local
Post Service Visitation Schedule
14 days after service, every 30 days for 6 months - if they move, get a good contact number and stay in touch
Command and Crew
with affected work center/division for prayer and support
Counselor support for work center personnel - FFSC
space visitation to affected area
counseling
Memorial Service
Medical and Mental Health leadership; assess needs
Who found the deceased? Extent of trauma?
Recommendations: CISM, SPRINT, Standdown
Resources; fliers, video, Guest Speaker
and LPO Mtgs - warning/danger signs and resources

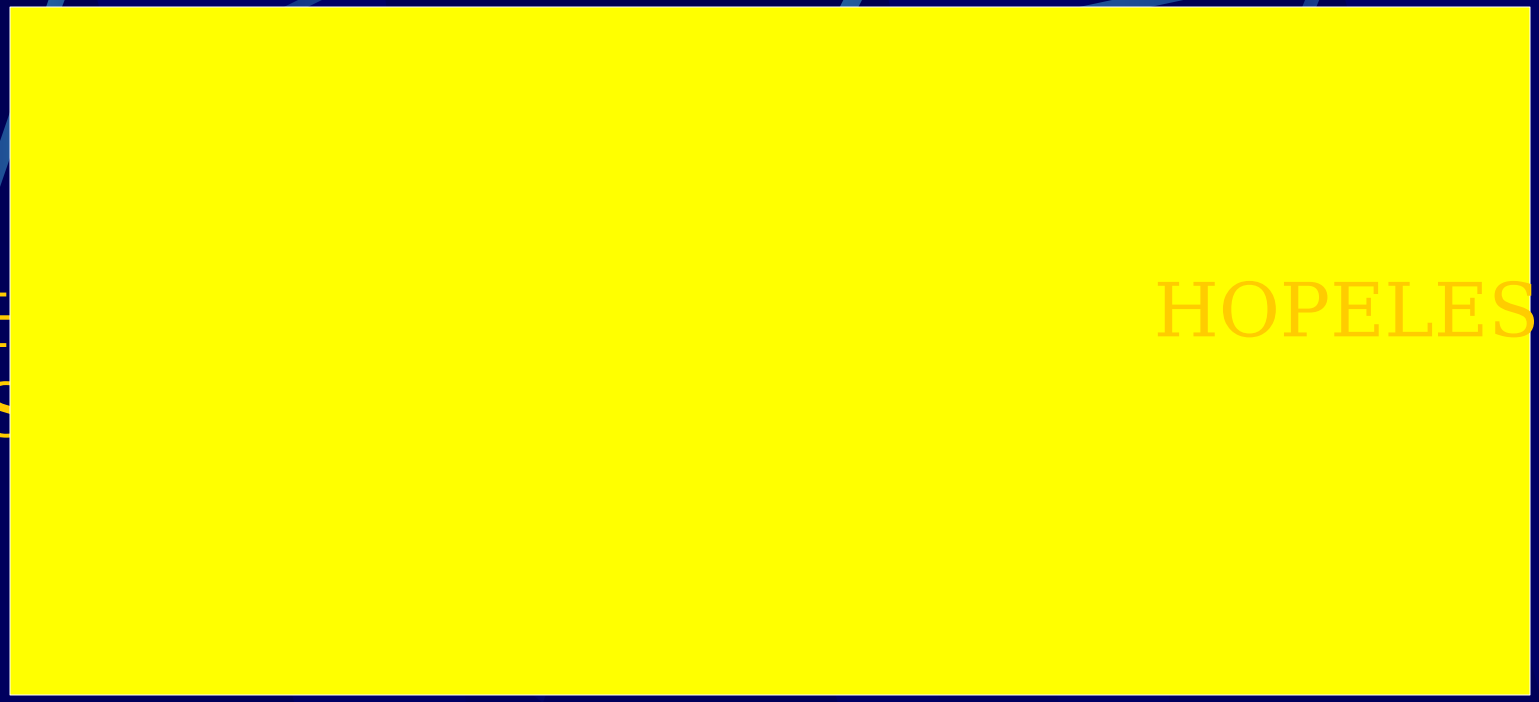
closure (1)

POST-SUICIDE ATTEMPT CARE PLAN
COMMAND RELIGIOUS MINISTRY DEPARTMENT
USS JOHN C STENNIS CVN-74


ATTEMPTED SUICIDE
Notification Received
Command in Home Port
Command at Sea
Establish COMS with Medical Facility Chaplain to coordinate immediate patient and family spiritual care plan
Establish COMS with CACO team (Chaplain) to coordinate ongoing family spiritual care needs
Meet w/Medical and CACO, plan visit strategy
CACO briefs visit strategy with Command and Department
Chaplain, Faith Community, FFSC, Mental Health for ongoing counseling
Coordinate any Chaplain w/family visit with CACO team after return to port
Chaplain hospital visit w/patient and family: establish relationship, identify needs, coordinate support assistance, contract next visit
Revisit patient and family next day
Coordinate support from family faith community, FFSC counselors, etc.
Schedule patient and family visit 14 days after event, family contact every 30 days for 6 months
Command and Crew
with affected work center/division for prayer and support
Counselor support for work center personnel - FFSC
space visitation to affected area
counseling
Medical and Mental Health Leadership; assess needs
onboard? Who found the sailor? Extent of trauma?
Recommendations: CISM, Standdown
Resources; fliers, video, Guest Speaker
and LPO Mtgs - warning/danger signs and resources

iclosure (2)

SUICIDE TRIANGLE



Remember

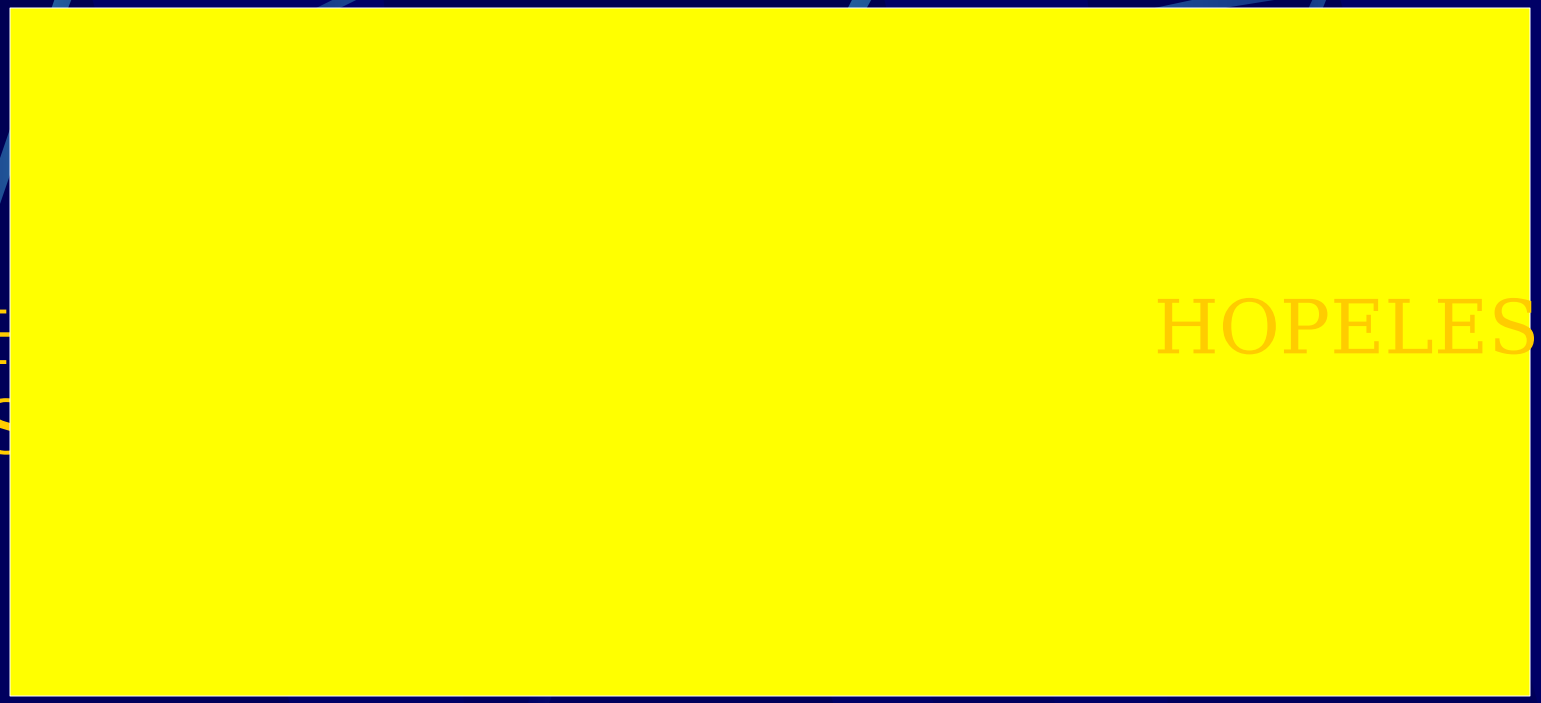
- **Human understanding is the most effective weapon against suicide. The greatest need is to deepen the awareness and sensitivity of people to their fellow human beings.**

Remember

ASK YOURSELF TWO QUESTIONS BEFORE TURNING IN FOR THE DAY.

IS THE SUICIDE TRIANGLE CLOSING FOR SOMEONE YOU KNOW?

SUICIDE TRIANGLE



Remember

The second question?

WITH THE KNOWLEDGE YOU HAVE CAN YOU SLEEP PEACEFULLY TONIGHT?